

B 1 (Official Form 1) (1.08)

United States Bankruptcy Court				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): <b>CUNNINGHAM, JAMES, WALTER</b>			Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>J. Cunningham J.W. Cunningham JIM CUNNINGHAM, James Cunningham, JIMMY CUNNINGHAM, WALTER CUNNINGHAM, WALT CUNNINGHAM</b>			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>4666</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):		
Street Address of Debtor (No. and Street, City, and State): <b>4059 N. PULASKI ST. # LF CHICAGO, ILLINOIS. 60641</b>			Street Address of Joint Debtor (No. and Street, City, and State):		
County of Residence or of the Principal Place of Business: <b>COOK</b>			County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address): <b>SAME</b>			Mailing Address of Joint Debtor (if different from street address):		
Location of Principal Assets of Business Debtor (if different from street address above):			ZIP CODE		
<b>Type of Debtor</b> (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
<b>Filing Fee</b> (Check one box.) <input type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input checked="" type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			<b>Chapter 11 Debtors</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input checked="" type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000					
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
<b>Estimated Liabilities</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

THIS SPACE IS FOR COURT USE ONLY

KENNETH S. GARDNER, CLERK  
U.S. REP. - DBS  
AUG 27 2009

FILED  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

**Page 2**

<b>Voluntary Petition</b> (This page must be completed and filed in every case.)		Name of Debtor(s): <b>JAMES W. CUNNINGHAM</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <b>US BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS</b>	Case Number: <b>05-63159</b>	Date Filed: <b>JANUARY 16, 2006</b>	
Location Where Filed: <b>ELECTRONICALLY FILED WITH CLERK 219 Dearborn (South) NORTHERN DISTRICT OF ILLINOIS</b>	Case Number: <b>05-63159</b>	Date Filed: <b>JANUARY 16, 2006</b>	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor: <b>JAMES W. CUNNINGHAM</b>	Case Number: <b>05-63159</b>	Date Filed:	
District: <b>NORTHERN DISTRICT OF ILLINOIS</b>	Relationship:	Judge: <b>John H. Squires, Jr.</b>	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). X Signature of Attorney for Debtor(s) (Date)	

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

No.

## Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

**If this is a joint petition:**

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**  
(Check any applicable box.)

- (Check any applicable box.)
- ☐ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**  
(Check all applicable boxes.)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B 1 (Official Form) 1 (1.08)		Page 3
<b>Voluntary Petition</b> (This page must be completed and filed in every case.)		Name of Debtor(s): <u>JAMES W CUNNINGHAM</u>
<b>Signatures</b>		
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u><i>James W Cunningham</i></u> Signature of Debtor</p> <p>X _____ Signature of Joint Debtor <u>312-770-0492</u></p> <p>Telephone Number (if not represented by attorney) <u>AUGUST 22, 2009</u></p> <p>Date _____</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>	
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X _____ Signature of Attorney for Debtor(s)</p> <p>_____ Printed Name of Attorney for Debtor(s)</p> <p>_____ Firm Name</p> <p>_____ Address</p> <p>_____ Telephone Number</p> <p>_____ Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>_____ Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>_____ Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>_____ If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>	
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>_____ Date</p>		

B 1D (Official Form 1, Exhibit D) (12/08)

## UNITED STATES BANKRUPTCY COURT

In re JAMES P. GUNN  
Debtor

Case No. \_\_\_\_\_  
(if known)

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☒ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*


☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: 

Date: 8-22-09

B6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court

Northern District Of Illinois

In re James Cunningham  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	NO	0	\$ 0	0	No Real Property Owned
B - Personal Property	YES	1	\$ 900.00	0	
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1	7000.00	\$4500.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	1		\$	
F - Creditors Holding Unsecured Nonpriority Claims	YES	1		\$	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	0				
I - Current Income of Individual Debtor(s)	YES	1	1467.00		\$
J - Current Expenditures of Individual Debtors(s)	YES	1	2100		\$
TOTAL			\$	\$	

Form 6 - Statistical Summary (12.07)

# United States Bankruptcy Court

Northern District Of Illinois

In re JAMES CUNNINGHAM  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 3100
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 6800
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0
Student Loan Obligations (from Schedule F)	\$ 0
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0
<b>TOTAL</b>	<b>\$ 9900</b>

State the following:

Average Income (from Schedule I, Line 16)	\$ 1467
Average Expenses (from Schedule J, Line 18)	\$ 2100
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$
4. Total from Schedule F		\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$

B6B (Official Form 6B) (12/07)

In re JAMES CUNNINGHAM  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	46 <sup>00</sup>	Pocket		
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.	<input checked="" type="checkbox"/>	NO Bank Accounts		
3. Security deposits with public utilities, telephone companies, landlords, and others.	175	W/ Landlord		
4. Household goods and furnishings, including audio, video, and computer equipment.	2500	\$ 2500		
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	NONE			
6. Wearing apparel.		\$ 650 - HOME		
7. Furs and jewelry.		4059 N Pulaski		
8. Firearms and sports, photographic, and other hobby equipment.	<input checked="" type="checkbox"/>	CHICAGO IL,		
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<input checked="" type="checkbox"/>	60641		
10. Annuities. Itemize and name each issuer.	<input checked="" type="checkbox"/>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<input checked="" type="checkbox"/>			



B6B (Official Form 6B) (12/07) -- Cont.

In re Cunningham, James W.  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	NOTE	DESCRIPTION AND LOCATION OF PROPERTY	MARKING, MORE, JUNK, OR COMMENT	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<input checked="" type="checkbox"/>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<input checked="" type="checkbox"/>			
14. Interests in partnerships or joint ventures. Itemize.	<input checked="" type="checkbox"/>			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<input checked="" type="checkbox"/>			
16. Accounts receivable.	<input checked="" type="checkbox"/>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<input checked="" type="checkbox"/>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<input checked="" type="checkbox"/>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<input checked="" type="checkbox"/>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<input checked="" type="checkbox"/>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<input checked="" type="checkbox"/>			

Premier CSI Dept SDPR  
PO Box 2208  
Vacaville, CA 95696

Public Storage  
3010 Wilshire Boulevard  
Santa Monica, CA 90403

Riverside County Recorder  
4080 Lemon Street  
Riverside, CA 92501

SBC Illinois  
Law Department  
225 W Randolph, Ste 27A  
Chicago, IL 60606

Short Term Loans, LLC  
1400 E Touhy  
#108  
Des Plaines, IL 60018

Sky Recovery Services  
12000 Westheimer  
#233  
Houston, TX 77077

Southwestern Bell Telephone  
539 McCullough  
Floor 4  
San Antonio, TX 78215

Sprint PCS  
4630 N Harlem Ave  
Chicago, IL 60706-4714

T-Mobile USA, Inc  
T-Mobile Bankruptcy  
PO Box 53410  
Bellevue, WA 98015-5341

TSYS Debt Management  
PO Box 5155  
Norcross, GA 30091

West Asset Management  
1000 F North Travis  
Sherman, TX 75090

West Suburban Cardiologists  
5201 S Willowsprings Rd  
La Grange, IL 60525

2000

28,000  
2500  
2000  
2100  
5000  
1100

1 Good-Son  
1 Hmsdale  
1 CAP  
1 Tithecoin  
1 DE  
1 DAAHinterasing  
2 Cuisinart  
1 Child Support  
1 Grillo BMW 4100  
1 ST AVE 01110018 TAX'SOR

1 JON Whorman  
1 Whorman Attorney  
1 TCF  
1 Chase

Revenue

Form B6E  
(10/05)

In re James W Cunningham

Case No.                     

Debtor

## SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\*Amounts are subject to adjustment on                     , and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

Form B6E - Cont  
(10/05)

In re **James W Cunningham**

Case No. ~~XXXXXX~~

Debtor

**SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B I T O R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
Account No. <b>551-88-4666</b>  <b>Internal Revenue Service Mail Stop 5010 CHI 230 S. Dearborn Street Chicago, IL 60604</b>			<b>2004-2005</b>  <b>Income Tax</b>				<b>4,900.00</b>	<b>4,900.00</b>
Account No. <b>SQ200300050441</b>  <b>Orange County Recorder 630 North Broadway Suite 101 Santa Ana, CA 92701</b>			<b>1992</b>  <b>County tax lien</b>				<b>746.00</b>	<b>746.00</b>
Account No. <b>443022</b>  <b>Paul McDonnell, Tax Collector Riverside County PO Box 12005 Riverside, CA 92502</b>			<b>11/2000</b>  <b>Unpaid Taxes - judgment</b>				<b>311.00</b>	<b>311.00</b>
Account No. <b>SQ2000443022</b>  <b>Riverside County Recorder 4080 Lemon Street Riverside, CA 92501</b>			<b>1992</b>  <b>State and county tax liens</b>				<b>2,379.74</b>	<b>2,379.74</b>
Account No.								
Subtotal (Total of this page)							<b>8,336.74</b>	<b>8,336.74</b>
Total (Report on Summary of Schedules)							<b>8,336.74</b>	<b>8,336.74</b>

Sheet 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

Form B6F

In re **James W Cunningham**

Case No. **09-31619**

Debtor

# **AMENDED** **SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	H W J C  C O D E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>53614666</b>  <b>Aspen Square Management</b> <b>6014 Winsome Lane</b> <b>Apt 117</b> <b>Houston, TX 77057-5528</b>	-		<b>03/2003</b> <b>Rental Charges</b>				<b>5,000.00</b>
Account No. <b>412174223843</b>  <b>Capital One Bank</b> <b>11013 W Broad St</b> <b>Glen Allen, VA 23060</b>	-		<b>08/02</b> <b>Credit card purchases</b>				<b>875.44</b>
Account No. <b>100264024040</b>  <b>Central Financial Control</b> <b>Box 14059</b> <b>Orange, CA 92863</b>	-		<b>07/2003</b> <b>Medical Bill</b>				<b>2,927.00</b>
Account No. <b>1209035746</b>  <b>ComCast Cable</b> <b>416 N Weber Rd</b> <b>Romeoville, IL 60446</b>	-		<b>01/2005</b> <b>Utility Services</b>				<b>510.00</b>
Subtotal (Total of this page)							<b>9,312.44</b>

5 continuation sheets attached

Form B6F - Cont  
(10/03)

In re **James W Cunningham**

Debtor

Case No. ~~8822~~

**AMENDED**  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E F O R C R E D I T O R	H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>8750101045</b>  <b>Commonwealth Edison</b> <b>System Credit/Bankruptcy Dept.</b> <b>2100 Swift Drive</b> <b>Oak Brook, IL 60523</b>		-		<b>2004</b> <b>Utility Services</b>				<b>680.30</b>
Account No. <b>1084860</b>  <b>Downers Grove National Bank</b> <b>5140 Main St</b> <b>Downers Grove, IL 60515</b>		-		<b>09/2005</b> <b>Overdraft Charges</b>				<b>244.00</b>
Account No. <b>unk</b>  <b>Dr. Stuart Sanders, DDS</b> <b>15224 Summit Avenue</b> <b>Oakbrook Terrace, IL 60181</b>		-		<b>05/2004</b> <b>Medical Bill</b>				<b>300.00</b>
Account No. <b>2412946</b>  <b>Entergy GSU</b> <b>PO Box 6008</b> <b>New Orleans, LA 70174</b>		-		<b>06/2002</b> <b>Utility Services</b>				<b>215.00</b>
Account No. <b>4731-9004-4566-2900</b>  <b>First National Bank of Marin</b> <b>PO Box 98875</b> <b>Las Vegas, NV 89193</b>		-		<b>06/2002</b> <b>Credit card purchases</b>				<b>608.34</b>
Sheet no. <b>1</b> of <b>5</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								<b>Subtotal</b> (Total of this page) <b>2,047.64</b>

Form B6F - Cont  
(10/05)

In re **James W Cunningham**

Debtor

Case No.                     

**AMENDED**  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>5178-0073-8200-0107</b>  <b>First Premier Bank</b> <b>601 S Minnesota Ave</b> <b>Sioux Falls, SD 57104</b>	-		<b>04/2005</b> <b>Credit card purchases</b>				<b>208.00</b>
Account No. <b>unk</b>  <b>Hinsdale Hospital</b> <b>Adventist Midwest Health</b> <b>PO Box 9247</b> <b>Hinsdale, IL 60522</b>	-		<b>2002</b> <b>Medical Bill</b>				<b>3,800.00</b>
Account No. <b>551-88-4666</b>  <b>Midwest Money Store</b> <b>1221 Maple Avenue</b> <b>Lisle, IL 60532</b>	-		<b>07/29/05</b> <b>Consumer loan - wage assignment</b>				<b>649.88</b>
Account No. <b>605180906</b>  <b>NCO Fin/38</b> <b>PO Box 13564</b> <b>Philadelphia, PA 19101</b>	-		<b>02/2003</b> <b>Collection Item - medical</b>				<b>1,539.00</b>
Account No. <b>21217969</b>  <b>NCO-Medclir</b> <b>PO Box 8547</b> <b>Philadelphia, PA 19101</b>	-		<b>06/2004</b> <b>Collection Item - medical</b>				<b>365.00</b>
<div>Sheet no. <u>2</u> of <u>5</u> sheets attached to Schedule of</div> <div>Creditors Holding Unsecured Nonpriority Claims</div> <div style="text-align: right;">Subtotal (Total of this page)</div>							<b>6,561.88</b>

Form B6F - Cont  
(10/05)

In re **James W Cunningham**

Case No. ~~XXXXXX~~

Debtor

**AMENDED**  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3-28-32-2102</b>  <b>Nicor Gas</b> <b>1844 Ferry Road</b> <b>Naperville, IL 60563</b>		-	<b>06/2005</b> <b>Utility Services</b>				<b>876.00</b>
Account No. <b>5489 5551 1341 9396</b>  <b>Orchard Bank</b> <b>P.O. Box 17051</b> <b>Baltimore, MD 21297</b>		-	<b>06/2005</b> <b>Credit card purchases</b>				<b>350.00</b>
Account No. <b>5178-0073-8290-0041</b>  <b>Premier Bankcard/Charter</b> <b>Post Office Box 2208</b> <b>Vacaville, CA 95696</b>		-	<b>04/2005</b> <b>Credit card purchases</b>				<b>418.42</b>
Account No. <b>16123655</b>  <b>Public Storage</b> <b>3010 Wilshire Boulevard</b> <b>Santa Monica, CA 90403</b>		-	<b>04/2004</b> <b>Bill for Services</b>				<b>240.00</b>
Account No. <b>8064368</b>  <b>SBC Illinois</b> <b>Law Department</b> <b>225 W Randolph, Ste 27A</b> <b>Chicago, IL 60606</b>		-	<b>01/2005</b> <b>Utility Services</b>				<b>569.00</b>
<div>Sheet no. <u>3</u> of <u>5</u> sheets attached to Schedule of</div> <div>Creditors Holding Unsecured Nonpriority Claims</div> <div align="right">Subtotal (Total of this page)</div>							<b>2,453.42</b>



Form B6F - Court  
(10/05)

In re James W Cunningham

Case No. 09-31619

Debtor

**AMENDED**  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>unk</b>  <b>Short Term Loans, LLC</b> <b>1400 E Touhy</b> <b>#108</b> <b>Des Plaines, IL 60018</b>		-	<b>07/2005</b> <b>Consumer loan</b>				<b>1,197.00</b>
Account No. <b>93373</b>  <b>Sky Recovery Services</b> <b>12000 Westheimer</b> <b>#233</b> <b>Houston, TX 77077</b>		-	<b>06/2002</b> <b>Collection Item - medical</b>				<b>240.00</b>
Account No. <b>2135478</b>  <b>Southwestern Bell Telephone</b> <b>539 McCullough</b> <b>Floor 4</b> <b>San Antonio, TX 78215</b>		-	<b>02/2003</b> <b>Utility Services</b>				<b>381.00</b>
Account No. <b>11428009</b>  <b>Sprint PCS</b> <b>4630 N Harlem Ave</b> <b>Chicago, IL 60706-4714</b>		-	<b>08/2004</b> <b>Utility Services</b>				<b>457.00</b>
Account No. <b>408782894</b>  <b>T-Mobile USA, Inc</b> <b>T-Mobile Bankruptcy</b> <b>PO Box 53410</b> <b>Bellevue, WA 98015-5341</b>		-	<b>06/23/2005</b> <b>Utility Services</b>				<b>67.78</b>
Sheet no. <u>4</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>2,342.78</b>

Form B6F - Cont  
(10/05)

In re **James W Cunningham**

Case No. ~~XXXXXX~~

Debtor

**AMENDED**  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R  H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. <b>5874051</b>							
<b>West Suburban Cardiologists</b> <b>5201 S Willowsprings Rd</b> <b>La Grange, IL 60525</b>			<b>02/2005</b> <b>Medical Bill</b>			<b>835.00</b>	
Account No.							
Account No.							
Account No.							
Account No.							
Sheet no. <b>5</b> of <b>5</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page)  <b>Total</b> (Report on Summary of Schedules)	<b>835.00</b>   <b>23,553.16</b>